



## H.RES. 988 – DESIGNATING THE MONTH OF MARCH 2008 AS "MRSA AWARENESS MONTH"

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### FLOOR SITUATION

H.Res. 988 is being considered on the floor under suspension of the rules and will require a two-thirds majority vote for passage. This legislation was introduced by Representative Jim Matheson (D-UT) on February 14, 2008. The resolution was referred to the House Committee on Energy and Commerce, but was never considered.

H.Res. 988 is expected to be considered on the floor of the House on September 23, 2008.

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### SUMMARY

H.Res. 988 resolves that the House of Representatives:

- Recognizes the need to apply what is already known about reducing the transmission of infections in hospitals and assuring appropriate use and utilization of antibiotics to meet patient and public health needs;
- Recognizes the need to pursue operational research to find the best ways of preventing hospital- and community-acquired Methicillin-resistant Staphylococcus aureus (MRSA) and developing new antibiotics for improving care for MRSA patients;
- Recognizes the importance of raising awareness of MRSA and methods of preventing MRSA infections; and
- Supports the work of advocates, healthcare practitioners, and science-based experts in educating, supporting, and providing hope for individuals and their families affected by community and healthcare associated infections.

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### BACKGROUND

According to the National Institutes of Health, Methicillin-resistant Staphylococcus aureus (MRSA) is an antimicrobial resistant strand of bacteria (meaning it exhibits resistance to drugs used to kill or slow the growth of infectious microbes) which is capable of causing severe infections in otherwise healthy people.

MRSA can be categorized into HA-MRSA (hospital acquired) or CA-MRSA (community acquired). HA-MRSA is largely the most commonly found of the MRSA infections, with a rising number of instances occurring in the past decade due to an increase in the number of invasive procedures among patients. These procedures include advanced surgical operations and life support treatments, and failures in infection control measures such as hand washing prior to patient contact and removal of non-essential catheters.

[NIH - MRSA](#)

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### STAFF CONTACT

For questions or further information contact Justin Hanson at 6-2302.